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| | | | |
|---|--------------------|--------------------------|------------------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | Complete if Known | |
| FEE TRANSMITTAL For FY 2005 | | Application Number | 09/622,245-Conf. #9683 |
| | | Filing Date | August 15, 2000 |
| | | First Named Inventor | Dominique Hamery |
| | | Examiner Name | Y. Y. Lee |
| | | Art Unit | 2613 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Attorney Docket No. | 11345/020001 |
| TOTAL AMOUNT OF PAYMENT | (\$) 910.00 | | |

METHOD OF PAYMENT (check all that apply)

| | | | | |
|---|---|---|-------------------------------|---|
| <input type="checkbox"/> Check | <input checked="" type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____ |
| <input checked="" type="checkbox"/> Deposit Account | Deposit Account Number: <u>50-0591</u> Deposit Account Name: <u>Osha & May L.L.P.</u> | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | |
| <input type="checkbox"/> Charge fee(s) indicated below | | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | | <input checked="" type="checkbox"/> Credit any overpayments | | |

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|----------------------------------|-----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |
| Total Claims | Extra Claims | Fee (\$) |
| _____ | _____ | _____ |
| Fee Paid (\$) | Multiple Dependent Claims | Fee (\$) |
| _____ | _____ | _____ |
| Fee Paid (\$) | Fee Paid (\$) | |
| _____ | _____ | |
| Indep. Claims | Extra Claims | Fee (\$) |
| _____ | _____ | _____ |
| Fee Paid (\$) | Fee Paid (\$) | |
| _____ | _____ | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--|--------------|--|----------|---------------|
| _____ | _____ | _____ | _____ | _____ |
| - 100 = _____ /50 _____ (round up to a whole number) x _____ = _____ | | | | |

4. OTHER FEE(S)

| | Fees Paid (\$) |
|---|----------------|
| Non-English Specification, \$130 fee (no small entity discount) | |
| Other (e.g., late filing surcharge): 1251 Extension for response within first month | 120.00 |
| 1801 Request for continued examination (RCE) (see 37 ...) | 790.00 |

SUBMITTED BY

| | | | | | |
|-------------------|--------------------|-----------------------------------|--------|-----------|----------------|
| Signature | <u>[Signature]</u> | Registration No. (Attorney/Agent) | 33,986 | Telephone | (713) 228-8600 |
| Name (Print/Type) | Jonathan P. Osha | THOMAS SCHOKER | | Date | April 4, 2005 |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV562272237US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: April 4, 2005

Signature: [Signature] (Brenda C. McFadden)